

HARVARD COLLEGE
OFFICE OF ACADEMIC PROGRAMS
UNIVERSITY HALL, 1ST FLOOR NORTH
CAMBRIDGE, MA 02138

COMMITTEE ON DEGREES IN
SPECIAL CONCENTRATIONS



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E-mail dfoster@fas.harvard.edu

CHECKLIST FOR SPECIAL CONCENTRATION

Your application should include:

1. General Information sheet which should be the first page of the application
2. Statement of Purpose*
3. Proposed Course Plan (Part 1)*
4. Proposed Course Plan (Part 2)*
5. Alternative Departmental Plan in case the Special Concentration is denied.
6. Summary of Course Differences Between Proposed Plan of Study and Alternative Plan of Study.
7. Statement of Senior Tutor or Designee, or Freshman Adviser.
8. Statement of Prospective Faculty Adviser. (**Must be a voting member of the Faculty of Arts and Sciences.**)
9. Statement of Department(s) Most Closely Related to Proposed Special Concentration.
10. Statement of Prospective Tutor, if applicable.
11. Most Recent Grade Report

*Please give copies of these statements to prospective Faculty Advisers and Tutors, Allston Burr Senior Tutor, and appropriate Head Tutor(s) **well in advance** of the application deadline so that they may consider them carefully and discuss them with you.

APPLICATION FOR A SPECIAL CONCENTRATION

The application must reproduce legibly (a black pen or, if printed, a fresh cartridge on your printer.)

Date of Application _____

Student Name: _____ **ID #:** _____

House (Mailing) Address: _____

e-mail Address _____ **Phone Number:** _____

Title of Special Concentration: _____

Freshman **Sophomore** **Junior** **Senior** (Please circle one.)

Honors (please circle) **YES** **NO** **Expected Date of Graduation:** _____

Present Field of Concentration: _____

SENIOR TUTOR, FRESHMAN ADVISER OR DESIGNEE

Name: _____

CLOSEST DEPARTMENT TO SPECIAL CONCENTRATION

Name of Department Representative Writing Statement:

FACULTY ADVISER(S) FOR SPECIAL CONCENTRATION

Name: _____

Department: _____

Departmental Title: _____

TUTOR(S) FOR SPECIAL CONCENTRATION

Name: _____

Department: _____

Departmental Title or Year in Graduate School: _____

Student Name: _____

Date: _____

STATEMENT OF PURPOSE

What do you propose to study and why do you want to approach it in this way?

Please justify, in as much detail as you judge necessary, your proposal as to:

- 1) its coherence and depth as a concentration, and
- 2) its adequacy as part of an undergraduate education in liberal arts.

Attach additional pages to this sheet. Statement should be limited to 2-3 pages (500-750 words).

Please Attach as Part of Special Concentrations Application. Return to University Hall 1st Floor North. In addition, please give copies to prospective Faculty Advisers and Tutors, Allston Burr Senior Tutor, and appropriate Head Tutor(s).

Student Name: _____

Date: _____

PROPOSED COURSE PLAN FOR SPECIAL CONCENTRATION (Part 1)

List **all** courses you plan to take in each semester. Also include all courses that you have already taken. Please distinguish unambiguously (e.g. underline, capitalize, or star) between courses you propose to count for Special Concentrations (including tutorials) and Core or elective courses.

Use descriptive as well as departmental titles ("Buddhist Hybrid Sanskrit" not just Sanskrit 110"); indicate whether the course is half or full credit, and consider prerequisites and limited enrollment.

Please feel free to attach additional pages to this sheet.

Please Attach as Part of Special Concentrations Application. Return to University Hall 1st Floor North. In addition, Please Give Copies to Prospective Faculty Advisers, Allston Burr Senior Tutor, and Appropriate Head Tutor(s).

Student Name: _____

Date: _____

PROPOSED PLAN FOR SPECIAL CONCENTRATION (Part 2)

Please provide a description of how the courses you propose cohere to form a unified whole. Imagine that you have been asked to provide an outline of your concentration for *Fields of Concentration*.

E.g. for a concentration in Cultural Studies & Politics:

4 half-courses in Critical Theory - courses will provide a base of knowledge in Cultural Studies, Postmodernism etc.

4 half-courses in representation - courses will provide background and knowledge of the representation of a number of different cultural identities.

3 half-courses analyzing the issues of race, class, and gender through the traditional lenses of the social sciences.

2 half-courses exploring the notion of praxis and political action - courses will provide theoretical and historical perspectives on the relationship between theory and practice.

4 half-courses in Special Concentrations tutorial - SC 98a and 98b, SC 99a and 99b.

Please feel free to attach additional pages to this sheet.

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Student Name: _____

Date: _____

ALTERNATIVE DEPARTMENTAL PLAN

List **all** the courses you would take to fulfill a departmental requirement if Special Concentration is denied. Realism and ingenuity are essential here: show how you could make the best use of an existing program. Please indicate which courses would be required for concentration and which you would choose to count for concentration. (Mark them RC, CC respectively)

Use descriptive as well as departmental titles ("Buddhist Hybrid Sanskrit" not just Sanskrit 110"); indicate whether the course is half or full credit, and consider prerequisites and limited enrollment.

Please feel free to attach additional pages to this sheet.

Student Name: _____

Date: _____

COMPARISON OF PROPOSED AND ALTERNATIVE PLAN

Summarize the differences between your proposed Special Concentration program and your departmental alternative. Please also list 1) Special Concentration courses you would have to forego if your petition were denied and 2) department courses you would not take if it were granted.

Please feel free to attach additional pages to this sheet.

Please Circle: I DO I DO NOT waive any right of access I may have to this reference form.

Student signature: _____

Student Name: _____

Date: _____

STATEMENT OF SENIOR TUTOR, FRESHMAN ADVISER OR DESIGNEE

The Committee on Special Concentrations recognizes that no Senior Tutor can comment authoritatively on every student's academic specialty. We do rely, however, upon your understanding of the students themselves. How would you assess the applicant's maturity, initiative, discipline, and perseverance? Can he or she dispense with the collegiality, advice and support a departmental concentration provides?

If you do not know the student well, would you suggest someone better able to comment on him/her.

Please feel free to attach additional pages to this sheet.

Signature: _____

Date: _____

Name and House: (Please print)

(The Committee on Special Concentrations appreciates the care and candor with which you will reply.)
Return to University Hall 1st Floor North.

Please Circle: I DO I DO NOT waive any right of access I may have to this reference form.

Student signature: _____

Student Name: _____

Date: _____

STATEMENT OF PROSPECTIVE FACULTY ADVISER

As prospective Faculty Adviser, your support is, apart from the student's own commitment, the most crucial factor in the success of a Special Concentration. Students who elect Special Concentrations forego the support as well as the constraints of a department; you therefore will bear substantial responsibility for their education.

1) Do you support the proposal as described in the Statement of Purpose and Plan of Study the student has submitted to you? Will the student's undergraduate education be as (or more) coherent, balanced, and thorough as a departmental concentration? Why do you particularly recommend it? Have you any misgivings?

2) Are you willing to assume quasi-departmental responsibility for advising the student: tutoring him/her yourself or finding a colleague willing to tutor him/her; discussing course selections and signing his/her study card each term; approving changes in his/her Plan of Study; arranging for thesis readings; setting and grading a general examination; writing letters of recommendation?

Please feel free to attach additional pages to this sheet.

Date: _____ **Signature:** _____

Name: (Please print) _____

Dept. & Dept. Title: _____

(The Committee on Special Concentrations appreciates the care and candor with which you will reply.)
Return to University Hall 1st Floor North.

Please Circle: I DO I DO NOT waive any right of access I may have to this reference form.

Student signature: _____

Student Name: _____

Date: _____

**DEPARTMENT MOST CLOSELY RELATED TO PROPOSED
SPECIAL CONCENTRATION**

The Faculty legislation authorizing Special Concentrations stipulates that a Special Concentration should not be granted if the student's Plan of Study can be pursued within an existing concentration. As the Head Tutor of the Department or degree-granting committee that best approximates this student's interests, would you evaluate the proposal and the Plan of Study he/she has submitted to you?

- 1) Is it thorough and coherent as an undergraduate program?
- 2) If you believe the proposal is sound, is it or is it not possible to accomplish its aims while fulfilling your concentration's requirements?

Please feel free to attach additional pages to this sheet.

Date: _____ **Signature:** _____

Name: (Please print) _____

Dept. & Dept. Title: _____

(The Committee on Special Concentrations appreciates the care and candor with which you will reply.) Return to University Hall 1st Floor North.

Please Circle: I DO I DO NOT waive any right of access I may have to this reference form.

Student signature: _____

Student Name: _____

Date: _____

Term for which tutorial is Proposed: _____

STATEMENT OF PROSPECTIVE TUTOR

Tutorial is an integral part of a Special Concentration. Students undertaking interdisciplinary studies need attentive and challenging tutors; they frequently have difficulty finding them.

1) Are you willing to serve as this student's tutor for the academic term indicated above?

2) Would you explain how the syllabus or your tutorial contributes to the student's Special Concentration as described in the proposal and Plan of Study he/she has submitted to you?

Please feel free to attach additional pages to this sheet.

Date: _____ **Signature:** _____

Name: (Please print) _____

Dept. & Dept. Title: _____

(The Committee on Special Concentrations appreciates the care and candor with which you will reply.)
Return to University Hall 1st Floor North.